of molalla Moms club.

SEL 190

rev 12/24 ORS 255.235

Candidate	Filin
District	

This form must be filed wi	ith county elections official. All	information must be co	mpleted or the for	n will be rej	ected.
2025 District Election Filing Date	tes				
Candidate Filing February 8, 20	025 to March 20, 2025	Withdrawal Date	March 20, 2025		
This filing is an	Original		Amendme	nt	
Office Information					
Filing for Office of: Member	of the board MAD				
District, Position or County: Ma	olalla Aquatic District				
Filing Information					
Filing with the required \$10	.00 fee				
Prospective Petition	*****	The state of the s			
Candidate Information Name of Candidate					
First	MI		Last		
Barbara	j		Moore		
How you would like your name	e to appear on the ballot				
Barbara J. Moore					
Candidate Residence/Route A	ddress	April 10 to the first			
Street Address	to a light on the foreign as the state of the state of	City		State	Zip
34802 South E	Ilis Rd	Molalla		OR	97038
Candidate Mailing Address and	THE RESERVE OF THE SECRET OF THE PARTY OF TH				
Street Address or PO Box		City		State	Zip
34802 South E	llis Rd	Molalla		OR	97038
Work Phone	Home Phone		Cell Phone		
n/a	n/a		503-26	0-408	3
Email Address		Web Site, if applic	able		
barbabbles@g	n/a				
Race and Ethnicity Optional					
caucasian					
Occupation (present employm	ent) If no relevant experience,	None or NA must be ente	ered.	NO.	
Retired					
Occupational Background (pre	vious employment) If no releva	ant experience, None or I	NA must be entered		
Registered Nurse, Meml founders and Board mer	ber of Clarkes Grange, p				rd, one of

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Clackamas Community Collage	4 Years	Associate of Science Degree in Nursing	Nursing = RN
Educational Background (other) Attach a sepa	rate sheet if necessary.	4	
40+ years in the nursi	ing field		
Prior Governmental Experience (elected or a	ppointed) If no relevant expe	rience, None or NA must be ente	red.
Sargent- United states Air Force Sargent- Army National Guard			
Campaign Finance Information			
A candidate must file a Statement of Organization I later than the deadline for filing a nominating petit meet the criteria for an exemption. To meet the cri and not expect to spend or receive more than \$750	ion, declaration of candidacy, or teria, the candidate must serve :	certificate of nomination, whichever as their own treasurer, not have an e	r occurs first, unless they existing candidate committed
If you have an existing candidate committee you m includes changes to the election you are active in a	nd the office you are running for		
See the Campaign Finance Manual for the procedu	ral and legal requirements of est	ablishing and maintaining a candida	te committee.
Residence Address Exemption			
To exempt your residence address from public disc a Residence Address Exemption MUST include a pu	losure, complete form <u>SEL 180 –</u> blicly disclosable mailing addres	Residence Address Exemption Requ s. See the Candidates Manual for fur	est. The request for ther information.
I don't want my residence address to be di	sclosed. I will be filing a sepa	rate SEL 180 – Residence Address Ex	emption Request.
Candidate Attestation			
By signing this document, I hereby state that: → I will qualify for said office if elected; → All information provided by me on this form is:	true to the best of my knowledg	e	
Warning Supplying false information on this form m (ORS 260.715). A person may only file for o	ay result in conviction of a felon	y with a fine of up to \$125,000 and/o	or prison for up to 5 years. Irawn from the first filing, a



1-31-25